



5070 44

AMENDMENT TRANSMITTAL LETTER

Docket No.
WEN-0032

Application No. 10/811,824-Conf. #3065	Filing Date March 30, 2004	Examiner D. Pinkney	Art Unit 2873
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Applicant(s): Yoshiaki Mimura et al.

Invention: OPHTHALMIC APPARATUS

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	14	- 20 =		x	
Independent Claims	4	- 3 =		x \$200.00	\$200.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					120.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					\$320.00

Large Entity

Small Entity

No additional fee is required for this amendment.

Please charge Deposit Account No. 18-0013 in the amount of \$ 320.00.
A duplicate copy of this sheet is enclosed.

A check in the amount of \$ _____ to cover the filing fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge and credit Deposit Account No. 18-0013
as described below. A duplicate copy of this sheet is enclosed.

Credit any overpayment.

Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Dated: August 9, 2007

Ronald P. Kahanan
Attorney/Agent Reg. No.: 24,104

RADER, FISHMAN & GRAUER PLLC
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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2007		Application Number	10/811,824-Conf. #3065
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	March 30, 2004
TOTAL AMOUNT OF PAYMENT (\$ 320.00)		First Named Inventor	Yoshiaki Mimura
		Examiner Name	D. Pinkney
		Art Unit	2873
		Attorney Docket No.	WEN-0032

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES	
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0
2. EXCESS CLAIM FEES						
Fee Description						
Each claim over 20 (including Reissues) Small Entity Fee (\$) Fee (\$)						
50 25						
Each independent claim over 3 (including Reissues) Fee (\$) Fee (\$)						
200 100						
Multiple dependent claims Fee (\$) Fee (\$)						
360 180						
Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims						
14 - 20 = x = _____						
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)						
3 - 3 = 1 x 200.00 = \$200.00						
HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)						
- 100 = /50 = (round up to a whole number) x = _____						
4. OTHER FEE(S)						
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00						

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent)		Telephone
	24,104		(202) 955-3750
Name (Print/Type)	Ronald P. Karanen		Date
			August 9, 2007